FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000087229 (6)

MICHAEL W. RAUCH, P.A.

FILED Feb 26 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					I INDIVIDUS SUB URSON DESIN BUSIN BUSIN BUSIN GUIDA AUTH LUBIN SUBSU SUBSU UDIN FEDI		
•		Mailing Address					
	MERCIAL BLVD Dale fl 33334	871 E COMMERCIAL BLVD FT LAUDERDALE FL 33334					
t a production to ward						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified 10/21/1996	
2. Principat f	Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For	
1		26				65-0726232 Not Applicable	
Suite, Apt		Suite, Apt. #, etc. 27				Certificate of Status Desired	
City & Sta		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	Zip		untry	•	8. This corporation owes or has paid the current year Intangible	
4	25	[29]	30			Personal Property Tax due June 30. Yes No	
	9, Name and Address of Curr	ent registered Agent		81	Name	10. Name and Address of New Registered Agent	
RAUCH, MICHAEL W 871 E COMMERCIAL BLVD FT LAUDERDALE FL 33334				L			
				82	Street A	Address (P.O. Box Number is Not Acceptable)	
FI	LAUDENDALE LE 33334			83			
				84	City	85 Zip Code	
				-	J.,,	FL S Z D COUR	
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PRESIDENT & DIRECTOR Change Addition	
	OFFICERS A						
TITLE NAME	RAUCH, MICHAEL W	Direct	1,1 TI 1,2 N		1	LEGALDER A CLUECTOR NO CHANGE DIVININI	
STREET ADDRESS	AT4 E GOLDIEGONIA ON O				ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL 33334				T-ZIP		
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NAME			2.2 N	IAME			
STREET ADDRESS	· .				ADDRESS		
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TITLE NAME		□ DECEME	31 Ti 32 N			Cuange Li vocino	
STREET ADDRESS					ADDRESS		
CITY+ST-ZIP					ST-ZIP		
TITLE	<u> </u>	DELETE	4.1 T			☐ Change ☐ Additio	
NAME			4.21	NAME			
STREET ADDRESS			4.3 S	TREET	ADDRESS		
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NAME		prest	6.2 N		ļ	C Onengo C Recond	
STREET ADDRESS					ADDRESS		
CITY_CI_TID	1			utv C			

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if officering the corporation of the corporation with an address.

SIGNATURE:

Manuel

118/98

(954) 771-44()2